## PATENT APPLICATION FEE DETERMINATION RECORD

**Application** or Docket Number

Effective December 8, 2004

10/525096

| CLAIMS AS FILED - PART I   |  |   |   |                               |  |                                  |    |                     |                        |    |                            |                        |
|--|--|---|---|-------------------------------|--|----------------------------------|----|---------------------|------------------------|----|----------------------------|------------------------|
| CEAING A   |  |   | (Column   |                               | (Column 2)                             |                                  |    | SMALL ENT           |                        | OR | OTHER THAN SMALL ENTITY    |                        |
| U.S. NATIONAL STAGE FEES   |  |   |   |                               |  |                                  | 1  | RATE                | FEE `                  |    | RATE                       | FEE                    |
| BAS  | IC FEE   |   | SMALL ENT. = \$ 150   |                               | LARGE ENT. = \$ 300                    |                                  | 1  | BASIC FEE           |                        | OR | BASIC FEE                  | 30)                    |
| EXAMINATION FEE  |  |   | Satisfies PCT Au (4) = \$50   |                               | All other situations = \$ 100 / \$ 200 |                                  | 1  | EXAM. FEE           |                        |    | EXAM. FEE                  | 300                    |
| SEA  | RCH FEE  |   | U.S. is ISA = \$50 / \$100<br>ALL other countries =<br>\$ 200 / \$400 |                               |  | her situations =<br>250 / \$ 500 | 1  | SEARCH FEE          |                        |    | SEARCH FEE                 | 609                    |
| FEE FOR EXTRA SPEC. PGS.   |  |   | minus 100 =   |                               |  | / 50 ≐                           | 1  | X \$ 125 =          |                        |    | X \$ 250 =                 |                        |
| тот  | AL CHARGEA                                     | BLE CLAIMS                                | ج minus 20 =  |                               | •                                      | 1                                |    | X \$ 25 =           |                        | OR | X \$ 50 =                  | 50                     |
| IND  | EPENDENT CL                                    | AIMS                                      | ج minus 3 =   |                               |  |                                  |    | X \$ 100 =          |                        | OR | X \$ 200 =                 |                        |
| MUL  | TIPLE DEPEN                                    | DENT CLAIM PRI                            | ESENT   |                               |  |                                  |    | + \$ 180 =          |                        | OR | + \$ 360 =                 |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |   |                               |  |                                  |    | TOTAL               |                        | OR | TOTAL                      |                        |
| Column 1) (Column 2) (Column 3)  |  |   |   |                               |  |                                  |    | SMALL ENTITY        |                        |    | OTHER THAN<br>SMALL ENTITY |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>OUSLY                   | PRE\$ENT<br>EXTRA                |    | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | • 21                                      | Minus   | ر ••                          | -/                                     | = <i>U</i>                       |    | X \$ 25 =           |                        | OR | X \$ 50 =                  |                        |
|  | Independent                                    | • 2                                       | Minus   | ***                           | }                                      | <b>2</b> 0                       |    | X \$ 100 =          |                        | OR | X \$ 200 =                 |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   |                               |  |                                  | ]. | + \$ 180 =          |                        | OR | + \$ 360 =                 |                        |
|  |  |   | _   |                               |  |                                  |    | TOTAL ADDIT.<br>FEE |                        | OR | TOTAL ADDIT.<br>FEE        |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |   |                               |  |                                  |    |                     |                        |    |                            |                        |
| AMENDMENT 8  |  | CLAIMS REMAINING AFTER AMENDMENT          |   | HIGH<br>NUM<br>PREVIO<br>PAID | EST<br>BER<br>DUSLY                    | PRESENT<br>EXTRA                 |    | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •   | Minus   | ••                            |  | 9                                |    | X \$ 25 =           |                        | OR | X \$ 50 =                  |                        |
|  | Independent                                    | •   | Minus   | ***                           |  |                                  |    | X \$ 100 =          |                        | OR | X \$ 200 =                 |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   |                               |  |                                  |    | + \$ 180 =          |                        | OR | + \$ 360 =                 |                        |
| TOTAL ADDIT. OR TOTAL ADDI   |  |   |   |                               |  |                                  |    |                     |                        |    |                            |                        |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  If the "Highest Number Previously Paid For" (N THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |   |                               |  |                                  |    |                     |                        |    |                            |                        |